

ANNUAL REPORT 2022-23

**Oracle
Head
and
Neck
Cancer
UK**





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Who we are

Our mission

Improve Head and Neck cancer quality of life outcomes in the UK.

We will do this by

Enabling greater understanding, knowledge and awareness of Head and Neck Cancers.

Oracle Head and Neck Cancer UK will deliver on this mission across 4 areas: R (Research). A (Awareness). C (Collaboration). E (Experience of the Patient). We use these pillars as our R.A.C.E. to overcome the Head and Neck cancer crisis.

Oracle Head and Neck Cancer UK (formally Oracle Cancer Trust) supports **research projects** that demonstrate potential to deliver and drive greater understanding about Head and Neck cancers, how best to treat them and where the greatest unmet needs are;

- We will promote and fund projects that have the potential to deliver research breakthroughs in diagnostics and improved, patient-focused approaches to treatment of Head and Neck cancers;
- We will promote, fund and/or help deliver research projects that can create better understanding of patient populations and their needs;
- We will promote, fund and/or help deliver projects that collect and analyse Head and Neck Cancer data so that we learn from our successes and our mistakes.

Oracle Head and Neck Cancer UK drives, delivers and supports **awareness campaigns** focused on Head and Neck cancers;

- We will run, support and/or deliver campaigns that promote ways to prevent and/or reduce risk of Head and Neck cancers;
- We will run, support and/or deliver campaigns around Head and Neck cancers symptoms with the aim of reducing late-stage diagnosis;
- We will run, support and/or deliver campaigns promoting appropriate and more accessible resources for patients with Head and Neck cancers from diagnosis through treatment and post treatment support;
- We will run, support and/or deliver campaigns that ensure that the route to diagnosis is clear and positive, including ensuring that primary healthcare professionals have the knowledge and understanding required.

Oracle Head and Neck Cancer UK promotes and supports **collaboration** and creates key opportunities for knowledge sharing and agreeing best practice within Head and Neck cancers;

- We will fund, support, promote and/or deliver events with the aim of sharing and exchanging breakthroughs, innovations and best practices amongst Head and Neck cancer and allied healthcare professionals;
- We will fund, support, promote and/or deliver training opportunities for healthcare professionals interested in Head and Neck cancers to learn, share and exchange information, best practices and innovations in Head and Neck cancers.

Oracle Head and Neck Cancer UK will support, promote and encourage more focus and understanding on the **experience of the patient** within Head and Neck cancers;

- We will fund, support and promote projects that focus on better understanding Head and Neck cancer patients of all backgrounds and what barriers / unmet needs currently exist;
- We will fund, support and promote projects that directly improve support and/or ensure more visible support for all Head and Neck cancer patients pre, during and post treatment.

The above areas of work all directly link to the organisation's charitable objectives which are to preserve and protect health and to provide relief for individuals affected by Head and Neck cancer.

1. by advancing education and promoting and funding research in relation to the causes, prevention, treatment and cure of head and neck cancers, and publishing the useful results of that research;
2. by providing practical support, information and assistance to individuals affected by head and neck cancer, their carers and family; and
3. by promoting collaboration and best practice in the treatment and care of individuals affected by head and neck cancers, including (without limitation) through the provision of grants and financial support.

Thanks from our Chair

The 2022/2023 financial year was a year of stabilisation and regrouping following the challenges of the pandemic, untimely death of our founder and former Chair Peter Rhys-Evans and the difficult economic environment that continues to put pressure on this sector.

Raising awareness of the signs and symptoms of Head and Neck cancers is a top priority and vital if we are to change the increasingly worrying trends in the UK. Head and Neck cancers are the 4th most common type of cancer in the UK for men and the 8th most common overall. Advanced stage of diagnosis in Head and Neck cancers is associated with poor quality of life outcomes and survival and yet recent figures demonstrate that 60% of those diagnosed in the UK are diagnosed late stage. We also see a significant and growing number of Head and Neck cancers in our working age population in the UK and the cases globally are predicted to see a 30% increase annually by 2030. Significant efforts have been invested in growing our reach across the United Kingdom through a series of local engagement activities, more active social media presence, and focused campaigns.

Raising awareness and addressing the rising inequalities in Head and Neck cancer diagnoses in the UK is also a key focus. There is broad agreement and evidence that late stage diagnosis has a high correlation to deprivation and there are growing socio-demographic inequalities. As a national charity we are committed and focused on raising awareness and reaching communities across the UK, particularly those that are often underserved to ensure that the key signs and symptoms are more recognised, multiple routes to diagnosis promoted and risk factors highlighted.

In recognition of our expanding presence across the nation and our broadening scope dedicated to elevating awareness, fostering collaboration, and amplifying the patient voice, the Board, in late 2023, resolved to rebrand the charity as Oracle Head and Neck Cancer UK (formally Oracle Cancer Trust). This name change is designed to enhance our public visibility and more accurately convey our refined strategic emphasis.

We want to acknowledge the significant contributions of departing trustees Sir Michael Lockett and John Fallon and to welcome new trustees Professor Ghassan Alusi, Ali Hansford, Dr. Mehmet Sen, Gareth Thomas and Toby Amis who bring a broad and deep experience of oncology and business to the charity.

As we reflect on the achievements of the past year, we believe that our focused strategy and concerted efforts are steering Oracle Head and Neck Cancer UK in the right direction. The collaboration, research, awareness, and patient-centric initiatives undertaken align with our core mission to overcome the crisis in Head and Neck cancers. The challenges ahead, especially in fundraising and economic uncertainty, necessitate continued drive, ambition and adaptability. Oracle Head and Neck Cancer UK remains committed to advancing its mission, motivated by a dedication to improving the lives of those affected by Head and Neck cancers.

Thank you for your continued support.

**Keith Jones,
Chair, Oracle Head and Neck Cancer UK**

Welcome from our CEO

During late 2021 and early 2022, the charity conducted an extensive 360-degree strategic review, involving consultations with various stakeholders, examination of current cancer research, data analysis, and internal patient surveys, to concentrate efforts on areas with the greatest unmet needs and potential for significant direct impact.

It was clear from the review that we are facing a Head and Neck cancers crisis in the UK. Things are not going in the right direction and there is urgent need to address the root causes of this crisis. To have an impact and create change we need to be focused and efficient as an organisation, work together with key partners, and harness the power of our community.

The unfortunate truth is that Head and Neck cancers are a complex medical area with growing numbers, later stage diagnoses and more inequalities. To date it is an area that has been unrecognised, underfunded and with not enough collaboration between those involved. There are more than 30 different cancer types that can affect 14 separate physical sites in the head and neck area, making it a challenging area to navigate as a patient, carer or even healthcare provider. Creating more awareness of this cancer area in all communities and population groups is critical; as is ensuring that the key signs and symptoms are recognised and routes to diagnosis more straightforward. The diagnostic pathway is characterised all too often by missed opportunities for early diagnosis, struggling primary healthcare professionals, frustrated patients and overbooked specialist clinics. And the variance and inequalities across the treatment and post treatment pathway are troubling. The area of post treatment support is a particular area of unmet need.

Due to the location of the tumours and associated treatments, patients are often left with debilitating appearance, speech, eating, swallowing and/or respiratory problems as well as psychological effects of loss of function and change in body image. Many of these side effects are life changing and can last for months, years or are permanent. Unfortunately there are wide differences between one postcode and the next, which needs addressing.

To reflect our focus and objectives in addressing these challenges we have decided to rename the charity to Oracle Head and Neck Cancer UK (formally Oracle Cancer Trust). We believe this more clearly identifies what we are focused on and reflects our growing national footprint.

We look forward to continuing our work with and for our Head and Neck cancer community over the next year. In the meantime, I would like to take this opportunity to remember those whom we have lost to this disease over the past year and before their time. We need to do much more to ensure that future patients and generations have better chances at good quality of life outcomes.

We will continue to work tirelessly in your memory and you will not be forgotten.

With gratitude and hope for the future,

Tamara Kahn
CEO, Oracle Head and Neck Cancer UK

National Impact

Oracle Head and Neck Cancer UK is focused on having reach and impact across the UK. This is a challenging thing to achieve for a small charity and we are delighted by the amazing partnerships and collaborations that we have put in place over the last year. For us working nationally also means working locally and we look forward to more of this over the coming year. We are particularly delighted that we are now registered with the Scottish Charity Regulator, OSCR. We look forward to extending our reach and support for Head and Neck cancer across local communities and the 4 major Research Boards in Scotland.

Research

8 distinct UK Head and Neck Cancer translational research programmes, across 5 research centres

- University of Derby NHS Trust
- Institute of Cancer Research
- Newcastle University NHS Foundation
- Brunel University London

Awareness

- Increased the number and diversity of patient ambassadors we work with.
- Increased social media activity and focus on increasing awareness of signs and symptoms
- Focus on raising awareness of HPV+

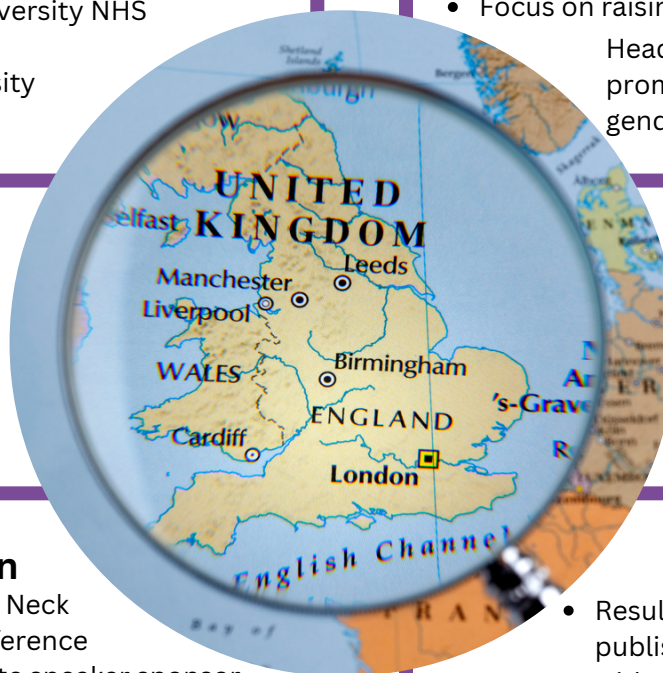
Head and Neck cancers and promoting uptake of the gender-neutral HPV vaccine.

Collaboration

- York Head and Neck Oncology conference
- BAHNO Keynote speaker sponsor
- Launch of Peter Rhys-Evans scholarships
- Joined the HPV Coalition
- Leadership in Head and Neck Cancer Coalition UK. (England and Scotland Cancer Strategy recommendations)

Experience

- Results of patient survey published in collaboration with the Head and Neck Cancer Coalition (HNCUK.org)
- Launch of 'Oracle Voices' - marrying patient experience with available scientific and medical expertise. To get our voices heard." Hazel Turner, Co-Chair



Caroline's story

5 years after receiving treatment for HPV 16 Oropharyngeal Squamous Cell Carcinoma, Caroline considers herself as one of the lucky ones and wanted to give back. In 2023, accompanied by her friend, she walked an epic 192 miles coast-to-coast and raised crucial funds for Oracle Head and Neck Cancer UK

In February 2018, I received the shocking news that I had head and neck cancer. The diagnosis came after months of investigations at Salisbury hospital for a damson-sized lump on the right side of my neck.

Despite good results from ultrasound scans, needle aspirations, a camera scope up my nose and down my throat, a CT scan and finally a PET scan (specifically to check for cancer cell activity), it turned out to be cancerous. I found out that I had oropharyngeal squamous cell cancer caused by the HPV virus.

The primary site of the cancer was found in the lingual tonsil, a difficult area to operate on due to its proximity to important structures like the carotid artery and jugular vein. I therefore faced two operations: one to secure the carotid artery and another to remove the tumour. In the end I never had the operation to remove the tumour because too much time had passed since investigations started, so it was decided to go straight to chemo-radiation. This was a bit worrying but was the best choice in hindsight.

The treatment plan involved radical chemoradiation (6 weeks of radiotherapy Mon- Fri and some Saturdays, with one long day a week of chemotherapy all morning before radiotherapy in the afternoon). There can be intense side effects: loss of ability to eat, swallow and talk due to severe burns, ulcers and destruction of the delicate and protective mouth lining (the mucosa). There was also loss of taste, and, prior to loss of saliva gland function, thick stringy mucus would gather at the back of my throat which I had to regularly remove via gagging and spitting. The mucosa protects the inner mouth from burning, so when the protective barrier is destroyed it results in extreme sensitivity.

The radiotherapy was unpleasant too, because I had to wear a thermoplastic mask made to fix me to the radiation table so that I couldn't move my head, as this would risk my brain or spinal cord being radiated and damaged.

Talking became difficult during the hardest part of treatment, but it softened to a husky hoarseness. I would learn to feed myself via a tube inserted direct through my skin and into my tummy, via an endoscopic procedure. The recovery process was tough, but I slowly started to regain my strength and taste sensation. However, my sense of taste was unpredictable, and I had to relearn how to eat certain foods. The lack of saliva due to the treatment was a long-term issue that affected my eating habits.

Despite the difficulties, I remained optimistic and grateful for surviving the ordeal. 5 weeks after my treatment I was able to travel to London by myself to visit my daughters. By September 2020, my condition had improved, and I could eat most foods my family did, although some things remained challenging. Walking and daily exercise helped with fatigue, but my weight remained the same as before treatment.

Now, in May 2023, I am continuing to recover, and my food consumption has improved. I have different tastes compared to before, and reduced saliva remains a long-term issue. Despite the lingering challenges, I am thankful to be alive and planning to take on a charity walk this summer.

Cancer treatment is a difficult journey, but it can be overcome with perseverance and medical support. Early detection and acting promptly are crucial for the best possible outcome. I hope my experience can raise awareness about the risks of HPV-related cancers and the importance of regular check-ups and vaccinations



Impact: Research

There have been some positive advances in treatment approaches and we know more than we did 5 years ago BUT patient outcomes are still not where they should be. Oracle Head and Neck Cancer UK continues to fund innovative research that provides better understanding and has the potential to improve Head and Neck cancer quality of life. During the 2022/2023 Financial Year Oracle Head and Neck Cancer UK paid out £310,247 in grants to 8 distinct UK Head and Neck translational research programmes.

The research grants issued by Oracle Head and Neck Cancer UK have supported programmes of work across 5 UK research centres from the University of Derby NHS Trust, Institute of Cancer Research, Newcastle University NHS Foundation and Brunel University London. We are very proud of the work that has and continues to come out of these programmes of work which include looking at areas such as:

- Salivary Gland Cells and Adenoid Cystic Carcinoma;
- Immunotherapy use and delivery in Head and Neck cancer;
- HPV+ Oropharyngeal Cancers;
- Combination treatment opportunities and possibilities for Head and Neck cancers;

- Opportunities for improved delivery of Radiotherapy in Head and Neck cancer patients.

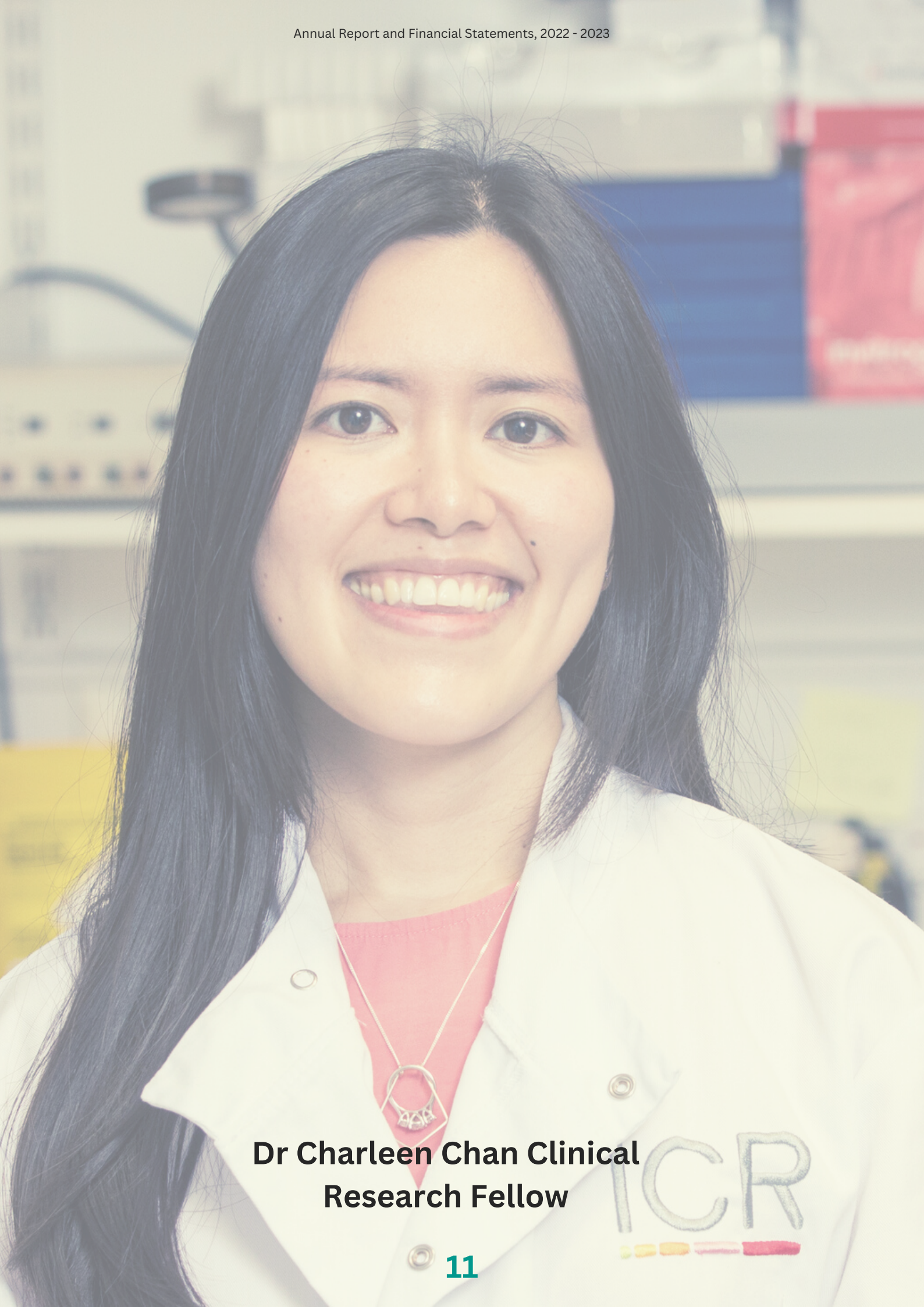
Also during the year, Oracle Head and Neck Cancer UK and North West Cancer Research joined forces as co-funders and issued a funding call around improved data around the rising inequalities in Head and Neck Cancer in the UK. This was a successful collaboration that resulted in a 2-year £125,000 award being given to a team of researchers led by Linda Sharp, Professor of Cancer Epidemiology at Newcastle University and colleagues. The project will compare incidence and survival rates across England and Wales with a focus on inequalities and deprivation links.

Research spotlight

Adenoid cystic carcinoma (ACC) is a type of cancer that starts in the salivary glands. It is linked to a gene called MYB, which, when activated, transforms normal gland cells into cancerous ones. The research focused on inhibiting MYB target genes, such as BUB1, a protein crucial for cell growth, to see if it could sensitize ACC cells to standard chemotherapy or radiotherapy. This study led by Arturo Sala found that a small molecule inhibitor called BAY 181 could effectively inhibit BUB1 in ACC tumors, potentially improving patient outcomes after cancer treatment.

Please scan here to hear more about the project:





**Dr Charleen Chan Clinical
Research Fellow**

Meet the Researcher:

Charleen Chan

This research investigates the underwhelming results of combining radiotherapy, chemotherapy, and immunotherapy in clinical trials for Head and Neck cancer. Examining T-cell responses in mouse models, the study seeks to understand and improve treatment efficacy, offering insights into optimal combinations and potentially reducing chemotherapy and radiotherapy doses to mitigate side effects in patients.

When did you first know that you wanted a career in research?

Through my training in clinical oncology I have seen first-hand how rapidly the field of treatment options for our patients can change based on new research findings and discoveries. This has made me want to be involved in research that can impact on clinical treatment.

How did you come to specialise in Head and Neck cancer?

I worked with Head and Neck cancer patients during my clinical oncology training at Guy's and St Thomas' NHS Trust and The Royal Marsden NHS Trust. Head and Neck cancer affects such a wide range of demographics and both diagnoses and treatment can have such a profound impact on patients' self-image and quality of life. I applied for a PhD investigating radiotherapy and immunotherapy combinations in Head and Neck cancer as this is an exciting area of research we hope will result in positive outcomes for patients.

What is the take home message of your research?

My research aims to investigate the dynamics of T-cell driven immune responses in locally-advanced Head and Neck Cancer. Understanding how T-cells change in activity and function over time when treatments are given can help guide us as to the best method of delivering these treatments and combining them with other agents such as immunotherapy.

Why did this research need to be done?

There has been increasing interest in treatments that boost the body's immune response against cancer (immunotherapy) to lead to long-lasting tumour control. Combining both radiotherapy and immunotherapy treatments in Head and Neck cancer has shown to be promising in the laboratory setting. Unfortunately, clinical trials testing these combinations in humans have thus far been disappointing. The reason behind why these clinical trials have failed is unknown and there is clearly a gap in translating laboratory findings to clinical trials. My project hopes to investigate the reasons for this by tracking T-cells which are important in kick-starting and sustaining our anti-cancer immune response. We hope that understanding this can help guide us as to the best method of delivering current and new treatments.

What have you learnt along the way?

I have learnt that research plans evolve and change depending on new results. It is important to keep an open mind and always ask the 'why'.

What difference will this make to patients?

I hope that my research into standard-of-care treatments in Head and Neck cancer will be able to better guide combinations of radiation with novel agents such as immunotherapeutics. Particularly in light of recently failed clinical trials, the aim is to provide improve outcomes as well as provide better quality of life for patients.



Impact: Awareness

Oracle Head and Neck Cancer UK has put significant effort over the past year into growing our reach across the United Kingdom. We are actively growing the number and diversity of patient ambassadors we work with.

Combining local awareness raising with more active social media activity and some key campaigns in the plans for this coming year will hopefully allow us to:

- Reach more members of the public across diverse community groups, increasing awareness of the most common signs and symptoms of Head and Neck cancers and routes to diagnosis. Oracle Head and Neck Cancer UK is working with local NHS Head and Neck cancer centres to engage directly with diverse communities to better understand and co-design awareness materials.
- We are also very focused on raising awareness of HPV+ Head and Neck cancers and promoting uptake of the gender neutral HPV vaccine. When most people think of HPV and cancer they think of cervical cancer. The awareness campaigns, HPV vaccine programmes and screening approach of cervical cancers are

a great example of how you can reduce incidence and drive early diagnosis of a cancer area through focus and concerted efforts. Unfortunately, the link between HPV and Head and Neck cancer is not as well recognised, awareness campaigns are slim on the ground and the vaccine isn't even formally recognised as preventing Head and Neck cancers. And yet, this is the fastest growing cause and type of Head and Neck cancers.

The most recent data shows that HPV-positive oropharyngeal squamous cell carcinoma accounts for up to 2,500 new cases each year in the UK, and this incidence is rising across the world. In the UK it is estimated that 50-70% of cancers in the Oropharynx region are HPV+ cancers. Within Head and Neck Cancers, HPV linked disease is being found in much younger population groups and with increasing proportional incidence in women.

Impact: Collaboration

Over the past year Oracle Head and Neck Cancer UK has continued to be a member and leader within the 15-member Head and Neck Cancer Coalition (HNCUK), which it helped set up in 2021. The Coalition members have agreed on key priorities and are actively engaging with stakeholders to drive much needed change around data, government cancer strategies and NHS reviews.

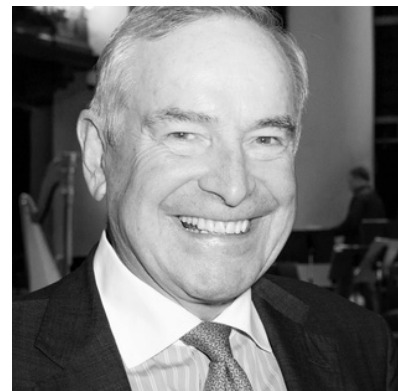


Oracle Head and Neck Cancer UK was also a founding member of the HPV Cancer Coalition in 2022. This Coalition published a key Roadmap towards making the elimination of all HPV-related cancers a reality across the UK.

The HPV virus will affect 80% of us at some point in our lifetimes and is the main cause of a range of cancers in both men and women, including Head and Neck, cervical, anal, vaginal, penile and vulva cancers.

Unfortunately although the rate of Head and Neck cancers is the highest amongst HPV cancers in the UK there is very little awareness or vaccine take up focused on this. These cancers are preventable through uptake of the HPV vaccine which is a key focus of the Coalition.

Oracle Head and Neck Cancer UK set up and has committed funding for an annual Peter Rhys-Evans Head and Neck cancer lecture at the Royal College of Medicine, Laryngectomy section. This annual talk that honours our Founder, Peter Rhys-Evans and his focus and drive on multidisciplinary discussion and exchange to improve Head and Neck cancer patient outcomes will support education and best practice sharing in Head and Neck cancers.



Oracle Head and Neck Cancer UK announced a new annual scholarship scheme for senior Head and Neck Cancer Trainees who would benefit from financial support to attend international multidisciplinary Head and Neck cancer conferences. The scholarships are being awarded in the name of Oracle's Founder, the late Peter Rhys-Evans, who was a strong advocate of multidisciplinary and international best practice exchange.

ESTRO



Impact: Patient experience

Across everything we do is a focus on the patient experience. Over the course of the last year we have focused much more on embedding patient voice into all aspects of our work.

Working with the Head and Neck Cancer UK Coalition we ran a Head and Neck cancer patient survey to capture the experience of Head and Neck Cancer patients in the UK and how their treatment could be improved. Oracle Head and Neck Cancer UK ran and hosted the patient survey and the Head and Neck Cancer Coalition helped to compile the results into a report titled 'Head and Neck Cancer in the UK: Patients, healthcare professionals and landscape analysis', which was supported by Merck. The report found that patients experienced significant physical and emotional side effects during treatment, which affected their quality of life. They also encountered communication problems during their care, as well as limited access to support services.

More recently we set up Oracle Voices which is co-chaired by two patients and is a national Head and Neck Cancer focused Patient and Public Involvement (PPI) Group with the aim of increasing the diversity of patients that are involved in research, surveys, unmet needs identification and campaigns. We are working with local PPI groups and individual patients and carers across the UK and starting to get engaged in a number of different projects both large and small.

“Healthcare providers and researchers need to hear from patients to fully understand how both current and future treatments can impact lives. PPIs like Oracle Voices can empower patients to do this through a collective voice.”

Anson Mackay, co-chair Oracle Voices



Jon's story

Jon (56), a husband and dad of 4, experienced a persistent hoarse voice for over a year but put it down to the new inhaler he was taking. In November 2022, his world turned upside down and here he shares his story.

Jon, a 57-year-old builder, shared his life story, which took a drastic turn when he discovered he had cancer of the voice box. Initially, he dismissed it as a persistent sore throat, but an urgent ENT appointment revealed the severity of his condition. After a biopsy and scans, he was diagnosed with stage 3 cancer covering 40% of the airway. Plans for 30 weeks of radiotherapy and chemotherapy were made, but the situation worsened when the cancer spread through the thyroid.

Facing the choice of a total laryngectomy or a limited life expectancy, Jon chose the surgery. His operation on January 9th lasted 9 hours,

and he woke up in ICU with COVID. After a challenging recovery, including 21 days in the hospital, he returned home before starting chemotherapy and radiotherapy. Despite the hardships, Jon can now speak and perform daily activities through a hole in his neck. Reflecting on his experience, Jon emphasises the importance of seeking medical advice promptly and not delaying when noticing changes in one's body. He regrets waiting too long before consulting a doctor and encourages others not to make the same mistake. His life has undergone significant changes, and he shares his story as a testament to the critical role of early medical intervention.

Our fundraising approach

In 2022/23, £500,249 was raised in support of our work. This came from amazing individuals, organisations and trusts - all helping to improve outcomes for Head and Neck cancer patients. We thank every single one of our supporters; because of them we are one step closer to winning the RACE against the crisis in Head and Neck cancers.

Our amazing fundraisers, and supporters are at the centre of everything we do. Their passion, determination, and belief in our mission inspire us every day. And even during the toughest times, faced with myriad economic challenges, our supporters continued to run, swim, cycle, and rally together for people affected by Head and Neck cancers. Here are just a handful of the courageous ways our supporters got involved and helped raise vital funds for our lifesaving work.

Our razor- sharp focus to work in partnership and accelerate fundraising in our race against the Head and Neck cancer crisis has never been more crucial.

Thank You

Oracle Head and Neck Cancer UK relies almost entirely on public support to continue our work - whether this be through financial donations, fundraising, donating time, or donating skills and services. We would like to thank every single person who has supported us for 2022/23 – without you, we could not do what we do for Head and Neck cancer patients!



Report from the Trustees

Financial Review 2022/23

From a financial perspective 2022/23 was a continuation of our recovery from the impact of the pandemic. Our total income for the year increased by 7.5% to £500,249 (2021/22: £465,691). This is a step forward but we still need further growth to enable Oracle Head and Neck Cancer UK to deliver our ambitious strategic plans as outlined in the CEOs report.

The cost of generating income was £159,686 for the year (2021/22: £132,478). This represents 32% of total income and 35.8% of our total expenditure. The increase in costs reflects the cost of developing the fundraising and admin processes of the charity including more staff and a higher cost of delivering events.

Research Grants

New grants are charged to the accounts at the date they are awarded for the period to which the charity is committed; this is normally the duration of the grant for awards of 18 months or less and the first year for multi-year awards. Subsequent years are recorded upon annual renewal. During 2022/23 grant amounts of £172,126 (21/22 £321,109) were recorded in the accounts and this includes new grants awarded totalling £84,801. The charity paid out cash funds of £310,247 (2021/22: £551,603) in respect of grants awards made in the year and earlier.

The charity has ongoing grant funding commitments of £178,832 (21/22 £298,037) being grant accruals on our balance sheet (Notes 11 & 12). Expenditure on research in 2022/23 included costs of managing our research programme, including working with research institutions and other funders, gathering data, promoting grant investment opportunities, working with our Research and Funding boards, and co-ordinating reviews ahead of making grant awards for following years. Proposals for new grants undergo a robust process of review before being awarded. Research grant awards normally have a duration of 1 to 3 years

Investments

At present Oracle Head and Neck Cancer UK does not have any significant investments and any reserves are held in a current account.

Reserves

Restricted funds at the end of the year totalled £36,762 (2021/22: £163,168) and Unrestricted funds at the end of the year totalled £144,483 (2021/22: £(37,161)). Included in Unrestricted funds are Fixed Assets with a net value of £734, (2022: £nil). It is our policy to continue to grow our unrestricted reserves to secure the resources to spend with patients, carers, clinicians, fellow charities and healthcare associations and other key stakeholders to ensure that we know where the unmet needs are and that those that need support have their voices heard.

The charity's policy is to maintain the following reserves:

- **Restricted funds** – funds that have been donated to the charity for a specific project or stream of work,
- **Designated funds** – funds identified and already committed for expenditure of research, awareness, partnership development and key operational commitments
- **General funds** – funds used towards operations, project management and delivery of Oracle's strategic pillars and key objectives with oversight by the CEO and Board of Trustees.

The benchmark for the Charity's general funds has been set at 6 months of operating expenditure. Once this level of reserves has been achieved, the Trustees will review the policy again, re-considering the long-term funding needs of our work

Structure, Governance and Management

Organisational structure

The organisation is a charitable company limited by guarantee, incorporated on 14th January 2010 and registered as a charity on 20th May 2011. The company was established under a Memorandum of Association which established the powers and objects of the charitable company and is governed under its Articles of Association of the same date.

In December 2023 the Board approved a name change of the charity to Oracle Head and Neck Cancer UK. This more closely aligns to our strategic ambitions and national reach.

Continuing the activities previously carried out by the unincorporated charity called the Head and Neck Cancer Research Trust (HNCRT), which had been established in 1979. The assets of the HNCRT were transferred to the Trust on 1st June 2011.

Related parties

The Trustees of Oracle Head and Neck Cancer UK (who are also Directors for purposes of Company Law) are listed on page 21. Board Directors and Trustees are leading industry figures and have varied backgrounds including finance, data, AI, general management, healthcare and oncology.

The Board meets bi-monthly and take overall responsibility for ensuring that the financial, legal and contractual responsibilities of the charity are met, and that there are satisfactory systems of financial and other controls. All decisions are currently ratified by the Board.

New Trustees are selected by a two stage process. The Board then selects the candidate/s to formally approach by majority decision. All Trustees, key management personnel and independent members of committees are required to sign a Conflicts of Interest Policy on an annual basis.

The charity has a Research and Funding committee that helps direct the work of the charity by providing expert advice to the Chief Executive Officer (CEO) and Trustees on:

- providing input, opinion and perspective on funding applications that the charity receives with regards to their potential to benefit and/or improve the Head and Neck Cancer patient pathway in the UK;
- helping source independent expert advice that helps direct and decide funding;
- providing recommendations to the Charity Board on suitability of applications for funding;
- overseeing the monitoring, governance and impact reporting of all research/impact funding at Oracle Head and Neck Cancer UK.

The Charity has developed a robust peer-review process and are members of to AMRC (Association of Medical Research Charities).

The day-to day management of the charity is delegated to the CEO, appointed in September 2021.

Risk statement

The Trustees have considered the major risks to which the charity may be exposed. The principal risks that we face in the charity are:

- that we might choose to allocate funds to programmes of work that are unlikely to succeed or are, at worst, fraudulent. The charity has established an independent Research and Funding Committee with relevant experts with a robust set of procedures to ensure that there is objective review and process around all significant research expenditure.
- that we may not meet our annual income targets and not be able to resource our planned activities. To this end the Charity develops an annual budget in support of its operational plan which is approved by Trustees. This forms the basis for financial monitoring. Management accounts and financial forecasts are reviewed monthly by the Trustees,
- that we might lose key members of staff. The Board has a succession plan, going forward all staff contracts ensure sufficient notice periods to allow recruitment and handover.

We also recognise that whilst our employees retained by the charity are incredibly motivated about our cause, we still need to treat them fairly and compensate them accordingly for their efforts and provide other ways to keep them feeling invested by the organisation. An annual pay review will take place, and we also know that in time our non-financial benefits can be enhanced to retain and recruit the calibre of employees we need to drive the charity forward.

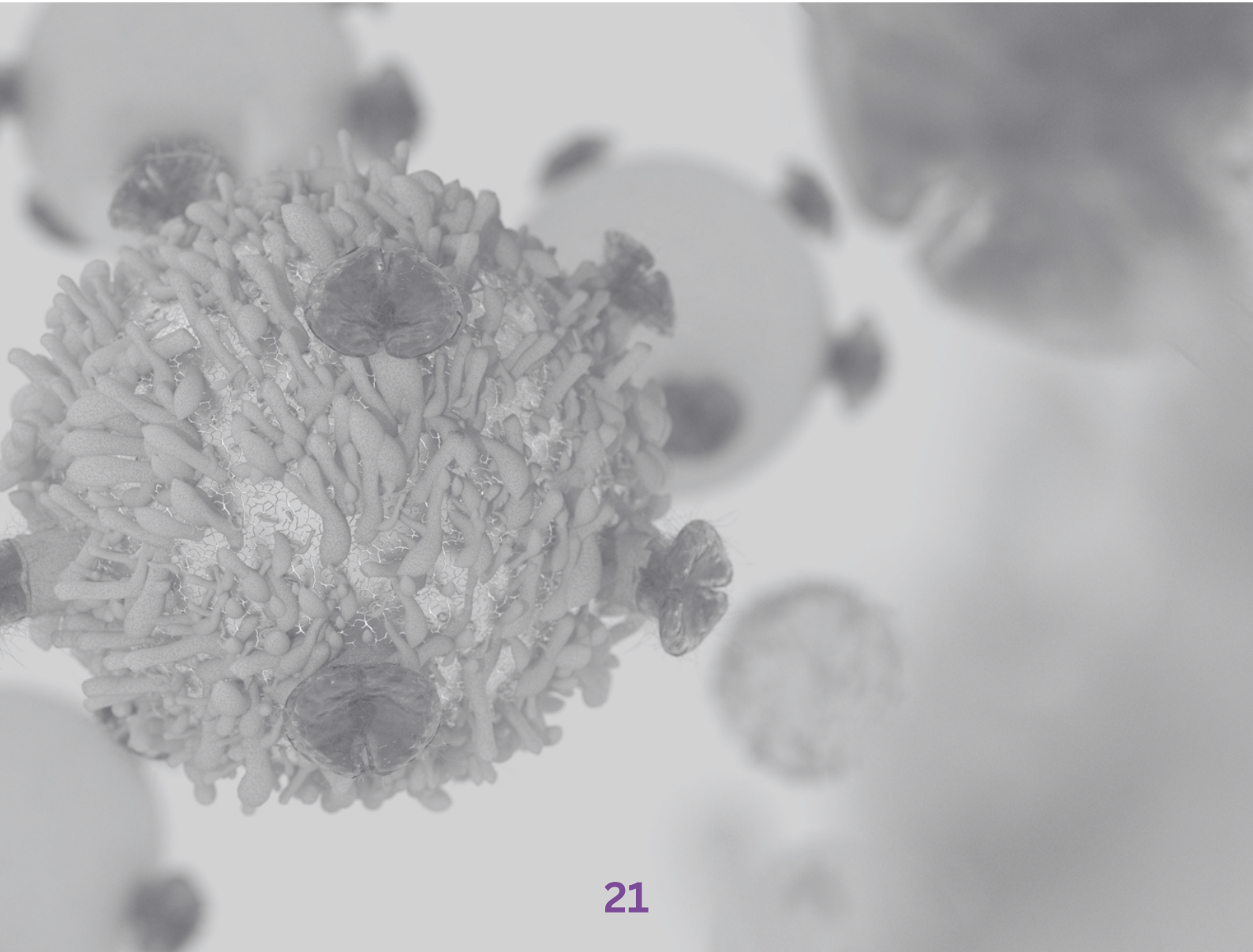
As the charity looks forward, we have seen the impact of the volatility of the employment market across the sector, which may affect our turnaround time to hire and with some roles struggle to hire and have had to adjust our recruitment practices accordingly.

Database and data management

A new fundraising database was implemented in the previous financial year, making it easier for the charity to remain compliant, help us engage with our donors in the right way and make decisions based on data available. improve . We continue to streamline some necessary processes and is already allowing us to use staff time more efficiently.

Marketing and communications

Oracle Head and Neck Cancer UK currently operates an “opt in” communications policy for all new supporters, this policy is being updated to ensure that we are reaching the maximum amount of people enabling us to meet our strategic objectives in the next Financial Year.



- that the impact on the economy from the Covid-19 pandemic, and the cost of living crisis will materially reduce the charity's annual income from 2022 onwards, and increase costs. The charity's budgeting and monitoring process in (b) above mitigates this risk.

Public benefit

The Trustees confirm that they have complied with the duty in section 17 of the Charities Act 2011 to have due regard to the public benefit guidance published by the Commission in determining the activities undertaken by the charity. The Trustees' Report section sets out how the charity addresses the public benefit requirement, and this is also explicit in our Charity's aims.

In this way we fulfill the charitable objects to fund pioneering research into all matters connected with or bearing upon the causes, prevention, treatment and care of cancer to include research into and to advance the art and science of surgery as applied to cancer of the head and neck and for the publication and dissemination of the results of such research.

Our approach to fundraising

As a supporter-focused charity, we recognise that the progress we make for people affected by Head and Neck cancers would not be possible without our supporters' generosity and passion. That is why our Fundraising Promise remains at the heart of how we fundraise.

If you choose to support us, you can be certain that we will:

- never put you under pressure to donate - be clear with you about our charity's aims and objectives
- respect your choices to opt in or out of our fundraising communications
- never share or sell your details to other charities or third parties for their own marketing purposes
- comply with all relevant data protection laws
- listen and learn – you can provide feedback about our fundraising at any time
- communicate with you in a way that suits you best

We are registered with the regulatory body for fundraising in the UK, the Fundraising Regulator, and pay an annual levy to support its work. We adhere to the standards outlined in the regulator's Code of Fundraising Practice (the code).

We fundraise in diverse ways to tell as many people as possible know about our work. We are currently focused on Individual, Corporate and Trust and Foundations and our activities include direct mail, email direct marketing, sponsored running, challenge and community-led events, and cash collections. We also host fundraising events and other social activities.

We review all of our fundraising campaigns to ensure they fully comply with the code, do not place an unreasonable intrusion on anyone's privacy or put undue pressure on them to donate. Our fundraising activities are also closely monitored by our Board of Trustees.

We encourage and learn from feedback from our supporters. In accordance with disclosure guidance from the Fundraising Regulator, we received no complaints relating to our fundraising activity in 2022/23, (2021/22:0). With the diversification of income streams and increased focus on acquisition this may change, as a result of increased activity.

Our people

We aim to ensure that the infrastructure that supports our work and governance remains fit for purpose, while retaining our positive attributes and aspiring to be a leading charity in employee support and benefits.

Our headcount as of 31st May 2023 was 4, which equated to less than 3 full time equivalents.

- CEO
- Head of Fundraising and Communications
- Fundraising and Communications Officer
- Intern

Legal and Administrative Information

Charity Name	Oracle Head and Neck Cancer UK (formerly Oracle Cancer Trust)
Trustees	Mr Peter Rhys-Evans, MB, BS, LRCP, FRCS, DCC (<i>resigned 17 May 2022</i>) Sir Michael Lockett, KCVO (<i>resigned 21st March 2023</i>) Mr John Fallon (<i>resigned 14 December 2022</i>) Mr Keith Jones Mr James Robertson Mrs Nicola Ridges-Jones Prof. Gus Alusi (<i>appointed 1 September 2022</i>) Mrs Ali Hansford (<i>appointed 1 September 2022</i>) Dr Mehmet Sen (<i>appointed 1 September 2022</i>) Mr Toby Amis (<i>appointed 1 April 2023</i>) Mr Gareth Thomas (<i>appointed 1 December 2023</i>)
Honorary Trustees	Prof. Kevin Harrington, BSc MBBS MRCP FRCR FRCP PhD DIC Prof. Christopher Nutting, BSc MBBS MD PhD FRCP FRCR MedFIPeM Dr Kate Newbold, MBChB MRCP FRCPE FRCR MD Prof. Vinidh Paleri MBBS MS FRCS (CSig) FRCS(ORL-HNS)
Patrons	Sir Michael Morpurgo Tony Matharu
President	Jimmy Mulville
Vice-Presidents	Nigella Lawson Jenny Pitman OBE
Charity Number	1142037 England & Wales / SC052790 Scotland
Company Number	07125497
Principal address	85 Great Portland Street, London, W1W 7LT
Registered Office of Charity	80 Coombe Road, New Malden, KT3 4QS
Auditors	Goldwins, 75 Maygrove Road, West Hampstead, London, NW6 2EG
Bankers	CAF Bank Limited, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 1BE
Solicitors	Dorsey & Whitney LLP, 199 Bishopsgate, London, EC2M 3UT

Statement of trustees responsibilities

The Trustees, who are also the directors of Oracle Head and Neck Cancer UK for the purpose of company law, are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company Law requires the trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charity and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that year.

In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity will continue in operation

The Trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Signed on behalf of the Board of Trustees:

Date: 21st December 2023



Keith Jones

Chair, Trustee

Oracle Head and Neck Cancer UK

Independent auditor's report

Opinion

We have audited the financial statements of Oracle Head and Neck Cancer UK (formerly Oracle Cancer Trust the 'charity') for the year ended 31 May 2023 which comprise the Statement of Financial Activities, the Balance Sheet and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 May 2023 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the Charity in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue. Our responsibilities and the responsibilities of the directors with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information. The other information comprises the information included in the annual report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Opinion on other matter prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the trustees' report (incorporating the directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report (incorporating the directors' report) have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report.

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of the trustees

As explained more fully in the Trustees' Responsibilities Statement, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view and for such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the Charity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the Charity or to cease operations, or have no realistic alternative but to do so.

Our responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud are set out below.

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We enquired of management, which included obtaining and reviewing supporting documentation, concerning the charity's policies and procedures relating to the internal controls established to mitigate risks related to fraud or non-compliance with laws and regulations.
- We inspected the minutes of meetings of those charged with governance.

- We reviewed the financial statement disclosures and tested these to supporting documentation to assess compliance with applicable laws and regulations.
- In addressing the risk of fraud through management override of controls, we tested the appropriateness of journal entries and other adjustments, assessed whether the judgements made in making accounting estimates are indicative of a potential bias and tested significant transactions that are unusual or those outside the normal course of business.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at: [www.frc.org.uk/auditorsresponsibilities]. This description forms part of our auditor's report.

Use of our report

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charity's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's members as a body, for our audit work, for this report, or for the opinions we have formed.

.....
Anthony Epton (Senior Statutory Auditor)
for and on behalf of Goldwins Limited
Statutory Auditor
Chartered Accountants
75 Maygrove Road
West Hampstead
London
NW6 2EG

14 February 2024

Statement of Financial Activities for the year ending 31 May 2023

(Incorporating the Income and Expenditure Account)

	Notes	Restricted Funds 2023 £	Unrestricted Funds 2023 £	Total Funds 2023 £	Total Funds 2022 £
INCOME					
Donations and legacies	1	32,300	159,009	191,309	293,559
Government grants received	1	283,894	-	283,894	144,228
Fundraising events		-	24,071	24,071	27,730
Investment income	2	-	974	974	174
Total Income		316,194	184,054	500,248	465,691
EXPENDITURE					
Costs of raising funds					
• costs of generating voluntary and fundraising income	3	0	159,686	159,686	132,478
Expenditure on charitable activities and Governance costs	4	253,036	32,288	285,324	379,754
Total expenditure		253,036	191,974	445,010	512,231
Net gains on investments		-	-	-	-
Net Expenditure for the year		63,158	(7,920)	55,238	(46,541)
Reconciliation of Funds					
Total Funds brought forward 1 June 2022		163,168	(37,161)	126,007	172,548
Transfer between funds		(189,564)	189,564	-	-
Total funds carried forward at 31 May 2023		36,762	144,483	181,245	126,007

The statement of financial activities includes all gains and losses recognised during the year.

All income and expenditure derives from continuing activities.

The attached notes form part of these financial statements

Balance Sheet at 31 May 2023

	Notes	2023		2022	
		£	£	£	£
FIXED ASSETS					
Tangible	9	<u>734</u>		<u>-</u>	
			734		
CURRENT ASSETS					
Debtors	10	13,496		5,666	
Cash at bank and in hand		<u>362,664</u>		<u>470,285</u>	
		376,160		475,951	
CREDITORS: Amounts falling due within one year	11	<u>180,130</u>		<u>349,944</u>	
NET CURRENT ASSETS			<u>196,030</u>		<u>126,007</u>
TOTAL ASSETS LESS CURRENT LIABILITIES			196,764		126,007
CREDITORS: Amounts falling due after one year	12		15,519		-
NET ASSETS			<u>181,245</u>		<u>126,007</u>
FUNDS					
Restricted funds	13		36,762		163,168
Unrestricted funds	14		144,483		(37,161)
TOTAL FUNDS			<u>181,245</u>		<u>126,007</u>

These financial statements were approved by the Trustees on the 20th December 2023 and are signed on their behalf by:



Keith Jones
Chair and Trustee

Company registration No: 07125497

Cashflow Statement at 31 May 2023

	2023		2022	
	£	£	£	£
Net cash used in operating activities		(107,743)		(244,045)
(see note below)				
Cash inflows from investing activities				
Investment income	974		174	
Payments to acquire tangible fixed assets	(852)		-	
Net cash provided by investing activities		122		174
Net change in cash and cash equivalents		(107,621)		(243,871)
Cash and cash equivalents at the start of the year		<u>470,285</u>		<u>714,156</u>
Cash and cash equivalents at the end of the year		<u>362,664</u>		<u>470,285</u>
Note - reconciliation of net expenditure to net cash flow from operating activities				
Net income (expenditure) - as per statement of financial activities		55,238		(46,541)
Investment income		(974)		(174)
Depreciation of tangible assets		118		-
(Increase)/ decrease in debtors		(7,831)		35,242
(Decrease)/ increase in creditors		(154,294)		(232,572)
Net cash used in operating activities		<u>(107, 743)</u>		<u>(244,045)</u>
Analysis of cash and cash equivalents				
Cash in hand		362,664		470,285
Total		<u>362,664</u>		<u>470,285</u>

Notes to the Financial Statements

Accounting Policies

a) Accounting convention

These financial statements are prepared on a going concern basis, under the historical cost convention. The financial statements have been prepared in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) including Update Bulletin 1. The Company is a public benefit entity for the purposes of FRS 102 and a registered charity established as a company limited by guarantee and therefore has also prepared its financial statements in accordance with the Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (The FRS 102 Charities SORP) and the Companies Act 2006.

Oracle Head and Neck Cancer UK meets the definition of a public benefit entity under FRS 102.

The financial statements have been prepared in sterling, which is the functional currency of the entity. Monetary amounts in these financial statements are rounded to the nearest pound.

b) Going concern

The trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might cast significant doubt on the ability of the charitable group to continue as a going concern. The trustees have made this assessment for a period of at least one year from the date of approval of the financial statements. In particular the trustees have considered the charitable company's forecasts and projections and have taken account of pressures on donation and investment income. After making enquiries the trustees have concluded that there is a reasonable expectation that the charitable company has adequate resources to continue in operational existence for the foreseeable future. The charitable company therefore continues to adopt the going concern basis in preparing its financial statements. At the date of sign off, the Trustees confirm there are no material uncertainties in relation to the going concern assumption.

c) Incoming resources

All incoming resources are included in the Statement of Financial Activities when the charity is entitled to the income, the receipts is probable and the amount can be quantified with reasonable accuracy. The following specific policies are applied to particular categories of income:

- Legacies are recognised following probate and once there is sufficient evidence that receipt is probable and the amount of the legacy receivable can be measured reliably. Where entitlement to a legacy exist but there is uncertainty as to its receipt or the amount receivable, details are disclosed as a contingent asset until the criteria for income recognition are met.
- Bank interest is accounted for on an accruals basis.
- Voluntary income by way of donations and gifts is included in full in the Statement of Financial Activities when receivable.

d) Resources expended and irrecoverable VAT

Resources expended including grants are included in the Statement of Financial Activities on an accruals basis. Commitment to fund future grants are recognised as liabilities once the obligation has been communicated to the grant recipient. Where there is an annual review or other performance review related conditions which means that the charity may withdraw a commitment if the conditions are not met, the liability is not recognised until the conditions have been fulfilled, and the commitment can no longer be revoked.

Expenditure includes VAT which is not recoverable by the charity. The majority of costs are attributable to specific charitable activities. Support costs include central functions and are allocated to cost categories on the basis of staff time spent on those cost categories. Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity.

Notes to the Financial Statements

Accounting Policies

e) Allocation of support costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Support costs include back office costs, finance, personnel, payroll and governance costs which support the Trusts programmes and activities. These costs have been allocated between cost of raising funds and expenditure on charitable activities. Further detail can be found in Note 5.

f) Operating leases

The charity classifies the leasing of office equipment as operating leases, the title remains with the lessor. Rental charges are charged on a straight line basis over the lease period.

g) Tax status

Oracle Head and Neck Cancer UK has suffered no tax charge, as it is not subject to UK Corporation tax on its charitable activities.

h) Fund Accounting

Funds held by the charity are either:

- **Unrestricted general funds** - these are funds that can be used in accordance with the charitable objectives at the discretion of the trustees.
- **Designated funds** - these are funds that are set aside by the trustees out of unrestricted general funds for specific future purposes or projects.
- **Restricted funds** - these are funds that are subject to restrictions on their expenditure imposed by the donor.

i) Fixed assets

Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life. Computer equipment - Straight line over 3 years.

j) Government grants

Government Grants represent funding received from the AMRC for qualifying projects. Funds are recognised on receipt.

k) Financial instruments

- **Cash and cash equivalents** - Cash and cash equivalents include cash at banks and in hand and short term deposits with a maturity date of three months or less.
- **Debtors and creditors** - Debtors and creditors receivable or payable within one year of the reporting date are carried at their transaction price. Debtors and creditors that are receivable or payable in more than one year and not subject to a market rate of interest are measured at the present value of the expected future receipts or payment discounted at a market rate of interest.

Notes to the Financial Statements (Continued)

1. Donations and Legacies

		2023 £	2022 £
General donations	Restricted	32,300	67,555
	Unrestricted funds	140,521	224,791
Grant funding	Restricted	-	-
	Unrestricted funds	18,488	-
Legacies	Restricted	-	-
	Unrestricted funds	-	1,213
		<u>191,309</u>	<u>293,559</u>
Government grants	Restricted	283,894	144,228
	Unrestricted funds	-	-
		<u>475,203</u>	<u>437,787</u>

The Trust benefits greatly from the involvement and enthusiastic support of its many volunteers, details of which are given in our annual report. In accordance with FRS 102 and the Charities SORP (FRS 102), the economic contribution of general volunteers is not recognised in the accounts.

2. Investment Income

		2023 £	2022 £
Bank interest receivable	unrestricted funds	974	174
		<u>974</u>	<u>174</u>

3. Costs of generating voluntary and fundraised income

		2023 £	2022 £
Unrestricted			
Fundraising and impact	Salaries	57,541	40,291
Delivery costs	Events	33,662	11,003
Support costs allocated (Note 5)		68,483	78,984
		<u>159,686</u>	<u>130,278</u>
Restricted			
Printing, Postage and stationery (from Mercers' Fund)		<u>-</u>	<u>2,200</u>

Notes to the Financial Statements (Continued)

4. Charitable activities and governance costs

	2023 £	2022 £
Research grants	172,126	321,109
Lecturer fees and expenses	495	-
Support costs (Note 5)	65,785	31,377
Governance costs (Note 6)	46,918	27,268
	<u>285,324</u>	<u>379,754</u>

All grants are payable to a range of research organisations to cover salaries and expenses of researchers.

5. Support costs

	2023 £	2022 £
Sub-contractors	82,672	69,838
PR consultancy	9,277	7,065
Printing, postage, stationery and website	11,069	12,403
Other office, travel and sundry	21,827	18,887
Recruitment	15,000	3,600
Allocated to Charitable activities (Note 4)	(65,785)	(31,377)
Allocated to Governance costs (Note 6)	(5,576)	(1,432)
	<u>68,484</u>	<u>78,984</u>

Sub-contractors includes the Chief Executive and Operations Manager

The Trust identifies its support costs, it then identifies those costs relating to Governance. The remaining support costs are allocated between Cost of Generating Funds and Governance Staff and related costs are allocated on a time basis, overheads are allocated in proportion to staff time.

6. Governance costs

	2023 £	2022 £
Bookkeeping and external audit	26,665	25,836
Legal and other professional	14,677	-
Support costs allocated (Note 5)	5,576	1,432
	<u>46,918</u>	<u>27,268</u>

Notes to the Financial Statements (Continued)

7. Net expenditure for the year

	2023 £	2022 £
This is stated after charging (net of VAT):		
Fees payable to the Auditor Audit services	5,000	4,500
Depreciation charge for the year	118	-
	<u>5,118</u>	<u>4,500</u>

The above figures exclude VAT in accordance with accounting reporting requirements. The actual cost to the charity was £6,000 (2022 : £5,400)

8. Staff costs, trustee remuneration and key management personnel

	2023 £	2022 £
Salaries	54,197	-
Employer NI	694	-
Pension costs	1,342	-
	<u>56,233</u>	<u>-</u>

During the year the average numbers of employees was 2 (2022 : nil)

Additional support has been provided throughout the year in administering and running the Charity.

In both 2022 and 2023 no employee earned more than £60,000 in that year.

The key management personnel of the charity comprise the trustees, the CEO and the operations manager. The total compensation paid to key management personnel amounted to £74,600 (2022 : £58,775)

No trustee was remunerated in the current or preceding year. Total key management personnel costs of three (2022: two) individuals.

Notes to the Financial Statements (Continued)

9. Tangible fixed assets

	2023 Computer Equipment £
Cost or Valuation	
At 31 May 2022	1,180
Additions	852
Disposals	(1,180)
	<u>852</u>
At 31 May 2023	
Depreciation	
At 31 May 2022	1,180
Charge for the year	118
Eliminated	(1,180)
	<u>118</u>
At 31 May 2023	
Net Book Value	
At 31 May 2023	<u>734</u>
At 31 May 2022	<u>-</u>

10. Debtors

	2023 £	2022 £
Grant and event debtors	5,000	-
Other debtors and prepayments	8,496	5,666
	<u>13,496</u>	<u>5,666</u>

11. Creditors - Due within 1 year

	2023 £	2022 £
Grant accruals	163,313	298,037
Deferred Income and other accruals	11,760	12,370
Trade creditors	2,400	39,537
Social security and other taxes	2,321	-
Other creditors	336	-
	<u>180,130</u>	<u>349,944</u>

12. Creditors - Due after 1 year

	2023 £	2022 £
Grant accruals	15,519	-

Notes to the Financial Statements (Continued)

13. Restricted funds

	Balance 1 June 2022 £	Income £	Expenditure £	Transfers £	Balance 31 May 2023 £
• CHK/ AMRC/ Mason Le Page for Koteva	12,033	38,076	(37,500)	(12,609)	-
• AMRC/ Swire - Pioneers of Discovery for Fleming and Melake	52,662	44,489	(68,179)	(11,974)	16,998
• AMRC for Patin	31,520	104,208	(13,068)	(122,660)	-
• Beaumont/Terradace for Marsh	34,079	-	-	(34,079)	-
• AMRC for Lin	30,824	-	(14,010)	-	16,814
• AMRC for Cicero/Sala	-	57,500	-	(57,500)	-
• AMRC for Freckleton	-	18,488	(34,278)	15,790	-
• AMRC for Chan	-	26,133	(22,725)	(3,408)	-
• Inequalities project	-	25,000	(62,076)	37,076	-
• University of Southampton for Lola internship	-	2,300	(1,200)	-	1,100
• Mercers Livery	1,850	-	-	-	1,850
• Pennycress Trust	200	-	-	(200)	-
	163,168	316,194	(253,036)	(189,564)	36,762

	Balance 1 June 2021 £	Income £	Expenditure £	Transfers £	Balance 31 May 2022 £
• CHK	39,533	-	(27,500)	-	12,033
• Swire - Pioneers of Discover for Fleming and Melake	130,000	-	(77,338)	-	52,662
• Beaumont/ Terradace/ AMRC for Patin	56,438	71,457	(76,150)	(20,225)	31,520
• Beaumont/ Terradace for Marsh	-	50,000	(25,558)	9,637	34,079
• AMRC for Lin	-	72,770	1,589	(43,535)	30,824
• Chellaram (Hobart)	37,311	17,556	1,190	(56,057)	-
• Worshipful Company of Mercers	4,050	-	(2,200)	-	1,850
• Pennycress Trust	200	-	-	-	200
• Big Give Immunotherapy appeal	18,310	-	-	(18,310)	-
	285,842	211,783	(205,967)	(128,490)	163,168

Notes to the Financial Statements (Continued)

Additional details

- **CHK Charities** are supporting PhD student, Jennifer Kieselmann, to undertake a cutting-edge computational project at the ICR's Division of Radiotherapy and Imaging.
- **Swire – Pioneers of Discovery** Match funding initiative to support PhD fellows in establishing their careers in the field, while directing more innovative research towards head and neck cancer.
- **Beaumont / Terradace / AMRC (Patin)** The aim of this project is to use drugs to make radiation more effective in killing cancer cells, but also to alert the immune system to their presence. In this way, the study aims to make radiation work better against hard-to-treat head and neck cancers (eg HPV-negative tumours), but also to reduce the side effects of treatment by needing to use less radiation dose to control more sensitive cancers (eg HPV-positive tumours).
- **Beaumont/Terradace (Marsh)** This project intends to understand the lifecycle and development of HPV infections within the mouth to determine how HPV causes head and neck cancer, in order to develop new treatments.
- **AMRC (Lin)** The work of Daniel Lin will study baseline IDO activity in patients and map this throughout head and neck cancer (HNC) treatment to establish IDO as a biomarker for HNC and support a more personalised therapeutic approach to improve patient outcomes.
- **Chellaram (Hobart)** PhD project looking at how medical imaging can be used to predict how likely a head and neck cancer patient is to respond to immunotherapy treatment.
- **The Worshipful Company of Mercers** Funding to support the production of awareness materials.
- **Pennycress Trust** Match funded by Pioneers of Discovery fund, supporting PhD fellows.

Any negative fund balances are rectified in the following financial year through the receipt of further income into the relevant fund.

14. Unrestricted funds

	Balance 1 June 2022 £	Income £	Expenditure £	Transfers £	Balance 31 May 2023 £
Designated funds					
• Blair Hesketh Memorial	66,293	-	(1,500)	-	64,793
General unrestricted funds	(103,454)	184,055	(190,475)	189,564	76,690
	(37,161)	184,055	(191,975)	189,564	144,483

	Balance 1 June 2021 £	Income £	Expenditure £	Transfers £	Balance 31 May 2022 £
Designated funds					
• Blair Hesketh Memorial	67,664	50	(1,421)	-	66,293
General unrestricted funds	(180,958)	238,858	(304,843)	128,490	(103,454)
	(113,294)	253,908	(306,264)	128,490	(37,161)

The Blair Hesketh Memorial Fund has been set up to provide funds for the Blair Hesketh lectures.

Notes to the Financial Statements (Continued)

15. Trustees' remuneration and expenses

No trustee received any remuneration or reimbursement for expenses in respect of the current year or preceding period.

16. Related Party Transactions

Three medical Trustee Directors sit on the Research Sub-Committee. Consequently they make recommendations upon the direction of the research, allocation of funding and Trustee Directors, for example, where the funded appointee delivers a partial clinical role which may alleviate their own clinical responsibilities. To mitigate this risk of related party benefit, the Research Sub-Committee is chaired by an independent Non Executive Director and it formally passes any funding proposals to the Finance & Investment Sub-Committee (whose members are non-medical) for review and necessary approval before onwards submission for a final Board decision.

Disclosures relating to Key Management Personnel are detailed in Note 8

17. Analysis of net assets between funds

	Unrestricted £	Fund designated £	Restricted £	2023 Total £
Tangible fixed assets	734	-	-	734
Debtors	6,996	1,500	5,000	13,496
Cash at bank and in hand	125,853	63,293	173,518	362,664
Creditors due within one year	(38,374)	-	(141,756)	(180,130)
Creditors due 1 - 2years	(15,519)	-	-	(15,519)
Balance on fund	79,690	64,793	36,762	181,245

18. Control

The Charity is controlled by the Trustees under the terms of the Trust Deed.

19. Post Balance Sheet Event

On 14th December 2023 the company changed its name from Oracle Cancer Trust Ltd to Oracle Head and Neck Cancer UK Ltd.



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Charity Number Scotland SC052790